## FEC FORM 2 STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)								
L. Tammy Duckworth								
(b) Address (number and street)					2. Identification Number			
1800 Bolleana Court (c) City, State and ZIP Code					H6IL06141 3. Is This	Now	Amended	
Hoffman Estates IL 60195					Statement	X New (N)	OR (A)	
	5. Office			6. State & Dis	trict of Candida	te	,	
DEMOCRATIC PARTY	House			IL 6				
DES	SIGNAT	TION OF PRIN	ICIPAL C	AMPAIGN (	COMMITTEE	<b>E</b>		
7. I hereby designate the following named	political c	ommittee as my Pri	incipal Camp	paign Committee		2006 ear of election	_ election(s).	
NOTE: This designation should be to	iled with t	the appropriate of	fice listed in	the instructions	S.			
(a) Name of Committee (in full)								
Friends of Tammy Duckworth								
(b) Address (number and street)								
416 W. 22nd St.								
(c) City, State and ZIP Code								
Lombard		IL 60148						
DES	SIGNAT	TION OF OTH	ER AUTI	HORIZED C	OMMITTEES	3		
		(Including Join	nt Fundraisi	ng Representat	tives)			
8. I hereby authorize the following named candidacy.	committee	e, which is NOT my	y principal ca	ımpaign committ	ee, to receive and	d expend func	ds on behalf of my	
NOTE:This designation should be f	iled with t	the principal camp	oaign comm	ittee.				
(a) Name of Committee (in full)								
IA Vets for Congress								
(b) Address (number and street)								
770 Broadway 2nd Floor								
(c) City, State and ZIP Code								
New York		NY 10003						
DECLARATION OF II	NTENT	TO EXPEND	PERSON	NAL FUNDS	(House or	Senate O	nly)	
9. I intend to expend personal funds exceed	eding the t	hreshold amount (s	see 11 C.F.R	. 400.9) by				
	9A			0.00	for the primary election, and			
	9B			0.00	for the genera	al election.		
If you do not intend to expend personal fur		ding the threshold a	amount for ei		ŭ			
I certify that I have exa	nined this	Statement and to	o the best o	f my knowledge	and belief it is t	true, correct	, and complete.	
Signature of Candidate					Date			
L. Tammy Duckworth					10/10/2006			
NOTE: Submission of false, erroneous	or incom	nplete information	may subjec	t the person sig	ning this Stater	nent to pena	lties of 2 U.S.C.§437g.	
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